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FACSIMILE COVER SHEET

ATTENTION: OFFICE OF PETITIONS

DATE: February 6, 2004

TO: Examiner Ngoc V. Dinh **FAX NO.:** 703-872-9306
USPTO GPAU 2187

FROM: J. Gustav Larson

RE U.S. App. No.: 09/963,861, filed 09/26/2001

Applicant(s): Michael Frank

Atty Dkt No.: 1376.0100580

Title: SYSTEM FOR HANDLING MEMORY REQUESTS AND METHOD
THEREOF

NO. OF PAGES (including Cover Sheet): 20

MESSAGE:

Attached please find:

- Petition for Revival of an Application for Patent Abandoned
Unintentionally under 37 CFR 1.137(b) (2 pgs)
- Fee Transmittal (1 pg)
- Original Facsimile Cover Sheet (1 pg)
- Transmittal Form for Response (1 pg)
- Fee Transmittal for Response (1 pg)
- Amendment (13 pgs)

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LAW OFFICES OF
TOLER, LARSON & ABEL, LLP
TELEPHONE (512) 327-5515
FACSIMILE (512) 327-5452
5000 PLAZA ON THE LAKE, SUITE 265
AUSTIN, TEXAS 78746

FACSIMILE COVER SHEET

DATE: July 11, 2003

TO: Examiner Ngoc V. Dinh,
USPTO GPAU 2187 **FAX NO.:** 703-746-7239
FROM: Rita M. Wisor

RE: App. No. 09/963,861

NUMBER OF PAGES (including Cover Sheet): 16

MESSAGE:

DOCUMENTS FOR OFFICIAL FILING

Please find attached:

Response to Office Action (13 pp)
Transmittal Letter (1 pp)
Fee Transmittal (1 pp)

DOCKETED
DATE: 7-11-03
BY: RWP

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*PAGE 5/20 * RCVD AT 2/6/2004 4:30:55 PM [Eastern Standard Time] * SVR:USPTO-EFXRF-115 * DMS:8729306 * CSID:5123275452 * DURATION (mm:ss):06-10*

PTO/SB/21 (05-03)

Approved for use through 04/30/2003. OMB 0651-0031
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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TRANSMITTAL
FORM

(to be used for all correspondence after initial filing)

TRANSMITTAL FORM (to be used for all correspondence after initial filing)		Application Number	09/983,861
		Filing Date	Sept. 26, 2001
		First Named Inventor	Frank et al.
		Art Unit	2187
		Examiner Name	Ngoc V. Dinh
Total Number of Pages in This Submission	15	Attorney Docket Number	1376.0100580

ENCLOSURES (Check all that apply)			
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):	<input type="checkbox"/>
Remarks			

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Rita M. Wisor, Reg. No. 41,382
Signature	<i>Rita M. Wisor</i>
Date	July 11, 2003

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

Typed or printed name	Katrina Pratt		
Signature	<i>Katrina Pratt</i>	Date	7-11-03

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PTO/SB/17 (05-03)

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FEE TRANSMITTAL for FY 2003

Effective 01/01/2003. Patent fees are subject to annual revision.

 Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 102.00)

Complete If Known

Application Number	09/963,861
Filing Date	09/26/2001
First Named Inventor	Frank, et al.
Examiner Name	Ngoc V. Dinh
Art Unit	2187
Attorney Docket No.	1376.0100580

METHOD OF PAYMENT (check all that apply)

 Check Credit card Money Order Other None
 Deposit Account:

Toler, Larson & Abel, LLP

50-2459

The Director is authorized to: (check all that apply)

Charge fee(s) indicated below Credit any overpayments
 Charge any additional fee(s) during the pendency of this application
 Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code (\$)	Fee Code (\$)	Fee Description	Fee Paid
1001 750	2001 375	Utility filing fee	
1002 330	2002 165	Design filing fee	
1003 520	2003 260	Plant filing fee	
1004 750	2004 375	Reissue filing fee	
1005 160	2005 80	Provisional filing fee	
SUBTOTAL (1) (\$ 0)			
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE			
Total Claims	Extra Claims	Fee from below	Fee Paid
28	-20** = 1	X 18 = 18	= 18
Independent Claims	4	- 3** = 1	X 84 = 84
Multiple Dependent		0	= 0
SUBTOTAL (2) (\$ 102.00)			
*or number previously paid, if greater. For Reissues, see above			
Other fee (specify) _____			
Reduced by Basic Filing Fee Paid		SUBTOTAL (3) (\$ 0)	
(Complete if applicable)			

SUBMITTED BY

Name (Print/Type)	Rita M. Wisor	Registration No. (Attorney/Agent)	41,382	Telephone	512-327-5515
Signature	Rita M. Wisor			Date	7/11/03

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PTO/SB/17 (10-03)

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FEE TRANSMITTAL for FY 2004

Effective 10/01/2003. Patent fees are subject to annual revision.

 Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 1330.00)

Complete If Known

Application Number	09/963,861
Filing Date	09/26/2001
First Named Inventor	Michael Frank
Examiner Name	Ngoc V. Dinh
Art Unit	2187
Attorney Docket No.	1376.0100580

METHOD OF PAYMENT (check all that apply)

 Check Credit card Money Order Other None
 Deposit Account:

Deposit Account Number
Deposit Account Name
50-2469

TOLER LARSON & ABEL LLP

The Director is authorized to: (check all that apply)

Charge fee(s) indicated below Credit any overpayments

Charge any additional fee(s) or any underpayment of fee(s)

Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION

1. BASIC FILING FEE

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code (\$)	Fee Code (\$)		
1001 770	2001 385	Utility filing fee	
1002 340	2002 170	Design filing fee	
1003 530	2003 265	Plant filing fee	
1004 770	2004 385	Reissue filing fee	
1005 160	2005 80	Provisional filing fee	
SUBTOTAL (1) (\$ 0)			

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Total Claims	Extra Claims	Fee from below	Fee Paid
	-20** =	x 18	
Independent Claims	- 3** =	x 86	
Multiple Dependent		0	0

Large Entity	Small Entity	Fee Description
Fee Code (\$)	Fee Code (\$)	
1202 18	2202 9	Claims in excess of 20
1201 86	2201 43	Independent claims in excess of 3
1203 290	2203 145	Multiple dependent claim, if not paid
1204 86	2204 43	** Reissue independent claims over original patent
1205 18	2205 9	** Reissue claims in excess of 20 and over original patent
SUBTOTAL (2) (\$ 0)		

*or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code (\$)	Fee Code (\$)		
1051 130	2051 65	Surcharge - late filing fee or oath	
1052 50	2052 25	Surcharge - late provisional filing fee or cover sheet	
1053 130	1053 130	Non-English specification	
1812 2,520	1812 2,520	For filing a request for ex parte reexamination	
1804 920*	1804 920*	Requesting publication of SIR prior to Examiner action	
1805 1,840*	1805 1,840*	Requesting publication of SIR after Examiner action	
1251 110	2251 55	Extension for reply within first month	
1252 420	2252 210	Extension for reply within second month	
1253 950	2253 475	Extension for reply within third month	
1254 1,480	2254 740	Extension for reply within fourth month	
1255 2,010	2255 1,005	Extension for reply within fifth month	
1401 330	2401 165	Notice of Appeal	
1402 330	2402 165	Filing a brief in support of an appeal	
1403 290	2403 145	Request for oral hearing	
1451 1,510	1451 1,510	Petition to Institute a public use proceeding	
1452 110	2452 55	Petition to revive - unavoidable	
1453 1,330	2453 665	Petition to revive - unintentional	1330.00
1501 1,330	2501 665	Utility issue fee (or reissue)	
1502 480	2502 240	Design issue fee	
1503 640	2503 320	Plant issue fee	
1460 130	1460 130	Petitions to the Commissioner	
1807 50	1807 50	Processing fee under 37 CFR 1.17(q)	
1808 180	1608 160	Submission of Information Disclosure Stmt	
8021 40	8021 40	Recording each patent assignment per property (times number of properties)	
1809 770	2809 385	Filing a submission after final rejection (37 CFR 1.129(a))	
1810 770	2810 385	For each additional invention to be examined (37 CFR 1.129(b))	
1801 770	2801 385	Request for Continued Examination (RCE)	
1802 900	1802 900	Request for expedited examination of a design application	
Other fee (specify) _____			
*Reduced by Basic Filing Fee Paid		SUBTOTAL (3) (\$ 1330.00)	

(Complete if applicable)			
SUBMITTED BY	J. Gustav Larson	Registration No. (Attorney/Agent)	39,263
Name (Print/Type)		Telephone	512-327-5515
Signature	<i>J. Gustav Larson</i>	Date	2-6-04

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